

CLAIMS ONLY							Application Number <div style="font-size: 1.5em; font-weight: bold;">10/826193</div>		Filing Date		
							Applicant(s)				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
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Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	1					
Total Depend	4					
Total Claims	5					

		Dependent		Independent	
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